Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF OREGON	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself			
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your	full name			
	your pictur exam	e the name that is on government-issued re identification (for nple, your driver's	Jon First name Thomas	First name	
	Bring identi	se or passport).  I your picture  Ification to your  Ing with the trustee.	McBurnie Last name and Suffix (Sr., Jr., II, III)	Middle name  Last name and Suffix (Sr., Jr., II, III)	
2.	used Includ	ther names you have I in the last 8 years de your married or en names.			
3.	your numl Indiv	the last 4 digits of Social Security ber or federal ridual Taxpayer tification number	xxx-xx-1378		

,		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	350 Thirteenth St Apt 315 Salem, OR 97301	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code  Marion  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code
		Number, 1.0. Box, Street, Oity, State & Zii Gode	Trumber, 1.0. Box, Street, Oity, State & Zii Gode
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Cł	napter 7				
			napter 11				
		☐ Ch	napter 12				
		☐ Cr	napter 13				
) <u>.</u>	How you will pay the fee		about how yo	ou may pay. Typi attorney is subm	cally, if you are paying the fee yo	with the clerk's office in your local court for more detail urself, you may pay with cash, cashier's check, or mone lf, your attorney may pay with a credit card or check wit	
			I need to pay	y the fee in insta		n, sign and attach the Application for Individuals to Pay	
			ŭ		s (Official Form 103A).	only if you are filing for Chapter 7. By law, a judge may	
			but is not req applies to yo	uired to, waive y ur family size and	our fee, and may do so only if you d you are unable to pay the fee in	ur income is less than 150% of the official poverty line the installments). If you choose this option, you must fill outial Form 103B) and file it with your petition.	
	Have you filed for bankruptcy within the last 8 years?	■ No					
	,		District		When	Case number	
			District		When	Case number	
			District		When	Case number	
0.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
1.	Do you rent your residence?	□ No	. Go to	line 12.			
	residence:	■ Ye	s. Has yo	our landlord obtain	ined an eviction judgment against	you?	
				No. Go to line 1	2.		

Case number (if known)

Debtor 1 Jon Thomas McBurnie

Debtor 1 Jon Thomas McBurnie					Case number (if known)
Den	Demont Alexand Anna Da		V	O-I- B	
Par	t 3: Report About Any Bu	Isinesses	You Own a	s a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Pa	art 4.	
		☐ Yes.	Name a	nd location of bus	siness
	A sole proprietorship is a				
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name o	f business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number	, Street, City, Sta	te & ZIP Code
	it to this petition.		Check to	he appropriate bo	x to describe your business:
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	rou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proc 11 U.S.C. 1116(1)(B).		a small business debtor, you must attach your most recent balance sheet, statement of
	For a definition of small	■ No.	I am not	filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filir Code.	ng under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filin	g under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous	s Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to		What is the	e hazard?	
	public health or safety? Or do you own any				
	property that needs			te attention is	
	immediate attention?		neeaea, w	hy is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the	ne property?	
					Number, Street, City, State & Zip Code

### Part 5:

## Explain Your Efforts to Receive a Briefing About Credit Counseling

### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

## ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

estimate your liabilities to be?  \$50,001 - \$100,000	"incurred by an				
individual primarily for a personal, family, or household purpose."    No. Go to line 16b.   Yes. Go to line 17.	"incurred by an				
Yes. Go to line 17.   16b.   Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.   No. Go to line 16c.   Yes. Go to line 17.   16c.   State the type of debts you owe that are not consumer debts or business debts					
16b.   Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.   No. Go to line 16c.   Yes. Go to line 17.   State the type of debts you owe that are not consumer debts or business debts					
money for a business or investment or through the operation of the business or investment.    No. Go to line 16c.   Yes. Go to line 17.					
Yes. Go to line 17.   State the type of debts you owe that are not consumer debts or business debts					
16c. State the type of debts you owe that are not consumer debts or business debts    17. Are you filing under Chapter 7?					
17. Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  18. How many Creditors do you estimate that you owe?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your liabilities to be?  19. So,0,001 - \$100,000					
Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  18. How many Creditors do you estimate that you owe?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your liabilities of \$50,001 - \$100,000   \$10,000,001 - \$10 million   \$500,000,001 - \$10 million   \$100,000,001 - \$10 million   \$100,000,001 - \$10 million   \$500,000,001 - \$100,000,001 - \$100 million   \$500,000,001 - \$100,000,001					
after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  18. How many Creditors do you estimate that you owe?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your liabilities to be?  19. How much do you estimate your liabilities to be?  19. Sign Below					
No     No	rative expenses				
be available for distribution to unsecured creditors?  18. How many Creditors do you estimate that you owe?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your liabilities to be?  10. How much do you estimate your liabilities to be?  10. Soo,000					
you estimate that you owe?    50-99					
you estimate that you owe?    50-99					
100-199					
estimate your assets to be worth?  \$50,001 - \$100,000					
be worth?    \$50,001 - \$100,000					
20. How much do you estimate your liabilities to be?    \$0 - \$500,001 - \$1 million					
estimate your liabilities to be?  \$50,001 - \$100,000					
to be?					
□ \$500,001 - \$1 million □ \$100,000,001 - \$500 million □ More than \$50 billion  Part 7: Sign Below					
	•				
For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and c					
	orrect.				
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill o document, I have obtained and read the notice required by 11 U.S.C. § 342(b).	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ and 3571.	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
/s/ Jon Thomas McBurnie  Jon Thomas McBurnie  Signature of Debtor 2  Signature of Debtor 1					
Executed on February 5, 2020 Executed on					
MM / DD / YYYY MM / DD / YYYY					

Debtor 1	Jon Thomas McBurnie	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Shawn M. Sornson	Date	February 5, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Shawn M. Sornson		
Printed name		
Upright Law, LLC		
Firm name		
5030 Commercial St. SE		
Salem, OR 97306		
Number, Street, City, State & ZIP Code		
Contact phone 503-585-3224	Email address	smsattorney@hotmail.com
914381 OR		
Bar number & State		

# **United States Bankruptcy Court District of Oregon**

	District of Oregon		
In re		_ Case No.	7
	Debtor(s)	Chapter	
	DISCLOSURE OF COMPENSATION OF ATTORN	EY FOR DE	EBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankru	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	1,500.00
	Prior to the filing of this statement I have received	\$	1,500.00
	Balance Due	\$	0.00
2. \$	\$335.00 of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4. 7	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any other person unle	ess they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who copy of the agreement, together with a list of the names of the people sharing in the context.		
<b>6.</b>	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of	the bankruptcy c	ase, including:
ł	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determ b. Preparation and filing of any petition, schedules, statement of affairs and plan which makes. Representation of the debtor at the meeting of creditors and confirmation hearing, and a d. [Other provisions as needed]  All services, except those identified in paragraph 7 below, that are readebtor's bankruptcy objectives including but not limited to:	ny be required; ny adjourned hea	rings thereof;
	<ul> <li>(1) File the certificate required from the individual debtor from an appropriate counseling agency for prepetition credit counseling;</li> <li>(2) Preparation and filing of all locally required forms;</li> <li>(3) Representation of the debtor at the § 341 meeting;</li> <li>(4) Amend any list, schedule, statement, and/or other document requinecessary or appropriate;</li> <li>(5) Motions under § 522(f) to avoid liens on exempt property;</li> <li>(6) Motions, such as motions for abandonment, or proceedings to cle</li> <li>(7) Advise the debtor with respect to any reaffirmation agreement; ne agreements if in the best interest of the debtor; and attend all hearing signed by the debtor;</li> </ul>	ired to be filed ar title to real p	with the petition as may be property owned by the debtor; e and file reaffirmation

- (8) Removal of garnishments or wage assignments;
- (9) Negotiate, prepare and file reaffirmation agreements;
- (10) Motions under § 722 to redeem exempt personal property from liens;
- (11) Compile and forward to the trustee and the United States trustee any documents and information requested;
- (12) Consult with the debtor and if there is a valid defense or explanation, respond to a motion for relief from the automatic stay;
- (13) File the debtor's certification of completion of instructional course concerning financial management (Official Form 423); and
- (14) Disclose any agreement and fee arrangement regarding the potential retention of co-counsel.
- 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Notwithstanding any agreement to the contrary, representation of the Debtor in any dischargeability action, adversary proceedings, or heavily litigated matters that are not listed in Paragraph 6 above.

In re Jon Thomas McBurnie		Case No.
	Debtor(s)	

# DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete statement this bankruptcy proceeding.	of any agreement or arrangement for payment to me for representation of the debtor(s) in
February 5, 2020	/s/ Shawn M. Sornson
Date	Shawn M. Sornson
	Signature of Attorney
	Upright Law, LLC
	5030 Commercial St. SE
	Salem, OR 97306
	503-585-3224 Fax: 503-585-3755
	smsattorney@hotmail.com
	Name of law firm

# UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

	DISTRICT C	OF OREGON		
In re	) Case N	lo.	(If Known	)
Jon Thomas McBurnie	)			,
	,	TER 7 INDIVIDUAL DEBTO	OR'S*	
<b>-</b>		EMENT OF INTENTION(S)		
Debtor(s)	) PER I	1 U.S.C. §521(a)		
IMPORTANT NOTICES TO DEBTOR(S):				
1.Complete, sign and file this form even if you have no		roperty of the estate or persona	l property subject to	unexpired leases. If
creditors are listed, make sure the certificate of service	is completed.			
2. Failure to perform the intentions as to property stated	d below within 30 da	ays after the first date set for th	e Meeting of Credito	rs
under 11 USC §341(a) may result in relief for the credi	tor from the Automa	atic Stay protecting such proper	rty.	
PART A - Debts secured by property of the estate. (Pa	art A must be fully c	completed for each debt which	is secured by proper	y of the estate. Attach
additional pages is necessary.)				
☐ IF NONE - Check this box.				
Property No. 1				
Creditor's Name:		Describe Property Secu	ring Debt:	
Regional Acceptance Co		2012 Dodge Ram	g v v.	
Property will be (check one): ☐ SURRENDERED	■ RETAINED	-		
Troporty will be (elected one). $\square$ betteen belief				
If retaining the property, I intend to (check at least one	e):			
☐ Redeem the property				
Reaffirm the debt				
$\square$ Other. Explain (for example, avoid lien using 11 U	JSC §522(f)			
<u>_</u>	_			
Property is (check one):   CLAIMED AS EXEMPT	NOT CLAIN	MED AS EXEMPT		
PART B - Personal property subject to unexpired lease	us (All three column	os of Port P must be completed	for each unavnired l	assa Attaah additional
pages if necessary.)	s. (An unee column	is of Fart B must be completed	Tor each unexpired i	ease. Attach additional
suges is necessary vy				
IF NONE - Check this box.				
Property No. 1				
Lessor's Name:	Describe Leased Pr	operty:		med pursuant to 11 USC
			§365(p)(2)	_
			☐ YES	□ NO
Continuation sheets attached (if any).				
I DECLARE UNDER PENALTY OF PERJURY THAT TI	HE ABOVE	I/WE, THE UNDERSIGNE	D, CERTIFY THAT C	OPIES OF BOTH THIS
INDICATES INTENTION AS TO ANY PROPERTY OF		DOCUMENT AND LOCAL	FORM #715 WERE S	
SECURING A DEBT AND/OR PERSONAL PROPERT AN UNEXPIRED LEASE.	Y SUBJECT TO	CREDITOR NAMED ABO	OVE.	
		5.555		
DATE: <b>February 5, 2020</b>		DATE: <b>February 5, 20</b>	)20	
/s/ Jon Thomas McBurnie		/s/ Shawn M. Sornson		914381 OR
DEBTOR'S SIGNATURE		DEBTOR OR ATTORNEY'S	S SIGNATURE	OSB# (if attorney)
JOINT DEBTOR'S SIGNATURE (If applicable)		JOINT DEBTOR'S SIGNAT	TIPE (If applicable and	no attorney)
JOINT DEBTOR'S SIGNATURE (II applicable)			503-585-3224	no autorney)
		PRINT OR TYPE SIGNER'S	S NAME & PHONE NO	).
		PRINT OR TYPE SIGNER'S  5030 Commercial St. S		).
		PRINT OR TYPE SIGNER'S 5030 Commercial St. S Salem, OR 97306		).

521.05 (12/1/16) **Page 1** 

## NON-JUDICIAL REMEDY WHEN CONSUMER DEBTOR FAILS TO TIMELY PERFORM STATED INTENTIONS

Creditors, see <u>Local Form #715</u> [attached if this document was served on paper] if you wish information on how to obtain non-judicial relief from the automatic stay of 11 U.S.C. §362(a) as to your collateral.

# **QUESTIONS????**

Call an attorney with questions about these procedures or the law. However, only call the debtor's attorney if you have questions about the debtor's intent as to your collateral.

Fill in	n this information	to identify your	case:			
Debte	or 1 <b>J</b> o	n Thomas McB	urnie			
D. I.		t Name	Middle Name	Last Name		
Debte (Spous		st Name	Middle Name	Last Name		
Unite	d States Bankrupt	cy Court for the:	DISTRICT OF OREGON			
Case (if know	number <sub>vn)</sub>				_	c if this is an ded filing
Offi	cial Form	106Sum				
			and Liabilities and	d Certain Statistical Information		12/15
inforr	nation. Fill out al	l of your schedule	es first; then complete the	are filing together, both are equally responsible fe information on this form. If you are filing amend the box at the top of this page.		
Part	1: Summarize	Your Assets				
					Your a	ssets of what you own
		r <b>operty</b> (Official Fo Total real estate, f			\$	0.00
	1b. Copy line 62,	Total personal pro	perty, from Schedule A/B		\$	26,120.00
	1c. Copy line 63,	Total of all property	on Schedule A/B		\$	26,120.00
Part :	2: Summarize	Your Liabilities				
						abilities t you owe
			aims Secured by Property ( nn A, <i>Amount of claim,</i> at th	(Official Form 106D) ne bottom of the last page of Part 1 of Schedule D	\$	30,153.00
			Unsecured Claims (Official I	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the tota	I claims from Part	2 (nonpriority unsecured cla	aims) from line 6j of Schedule E/F	\$	34,985.00
				Your total liabilities	\$	65,138.00
Part :	3: Summarize	Your Income and	Expenses			
		Income (Official For led monthly incom		J	\$	3,152.00
		Expenses (Official y expenses from li			\$	3,446.00
Part -	4: Answer The	se Questions for	Administrative and Statis	stical Records		
			er Chapters 7, 11, or 13? on this part of the form. Cho	eck this box and submit this form to the court with yo	our other scl	nedules.
7.	■ Yes What kind of deb	ot do you have?				
				ebts are those "incurred by an individual primarily for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	☐ Your debts	are not primarily	consumer debts. You have	e nothing to report on this part of the form. Check thi	s box and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,133.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	9,632.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	9,632.00

Fill in this	ic info	rmation to identify you	er acce and this filings			
FIII III UIII	S IIIIOI	mation to identity you	r case and this ming.			
Debtor 1		Jon Thomas Mo		Last Name		
Debtor 2		FIRST Name	Middle Name	Last Name		
(Spouse, if fi	iling)	First Name	Middle Name	Last Name		
United Sta	ates B	ankruptcy Court for the	DISTRICT OF OREGON			
Case num	nber					☐ Check if this is an
				<del></del>		amended filing
Officia	al Fo	orm 106A/B				
Sche	du	le A/B: Pro	perty			12/15
				e. If an asset fits in more than or	ne category, list the asset in	
	n. If mo	re space is needed, attac		people are filing together, both an On the top of any additional page		
Part 1: D	escribe	e Each Residence, Buildi	ng, Land, or Other Real Estate Yo	ou Own or Have an Interest In		
1. Do you o	own or	have any legal or equital	ole interest in any residence, bui	Iding, land, or similar property?		
_ `			•			
■ No. G						
☐ Yes.	Where	is the property?				
Part 2: D	escribe	e Your Vehicles				
3. Cars, v □ No ■ Yes	/ans, t	rucks, tractors, sport	utility vehicles, motorcycles			
3.1 Ma	ake:	Dodge	Who has an interest	in the property? Check one	Do not deduct secured cla	
	odel:	Ram	■ Debtor 1 only		the amount of any secure Creditors Who Have Clair	
Yea		2012	Debtor 2 only		Current value of the	Current value of the
App	proxima	ate mileage:	☐ Debtor 1 and Deb	tor 2 only	entire property?	portion you own?
Oth	her info	rmation:	At least one of the	e debtors and another		
			Check if this is c	ommunity property	\$25,000.00	\$25,000.00
■ No □ Yes  5 Add the pages  Part 3: D	he doll s you h	ats, trailers, motors, per lar value of the portion lave attached for Part	sonal watercraft, fishing vesse  you own for all of your entr  Write that number here	vehicles, other vehicles, and ls, snowmobiles, motorcycle action is snowmobiles, motorcycle action is snowmobiles, motorcycle action is snowmobiles.	y entries for	\$25,000.00
					j	ortion you own? On not deduct secured

Debtor	Jon Thomas McBu	rnie	Case number (if known)	
		<b>ngs</b> niture, linens, china, kitchenware		
■ Ye	es. Describe			
	Hous	sehold Furniture		\$500.00
□ N	mples: Televisions and radio including cell phones	os; audio, video, stereo, and digital equipment; comp s, cameras, media players, games	outers, printers, scanners; music o	collections; electronic devices
				¢200.00
	Cell I	Phone, TV		\$300.00
Exar	other collections, me	es; paintings, prints, or other artwork; books, pictures morabilia, collectibles	s, or other art objects; stamp, coin	, or baseball card collections;
Exar	musical instruments	<b>pies</b> , exercise, and other hobby equipment; bicycles, po	ol tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ N	amples: Pistols, rifles, shotg	uns, ammunition, and related equipment		
□ N	amples: Everyday clothes, fu	urs, leather coats, designer wear, shoes, accessorie	es	
	Cloth	nes		\$300.00
■ N	amples: Everyday jewelry, co	ostume jewelry, engagement rings, wedding rings, h	neirloom jewelry, watches, gems,	gold, silver
Exa ■ N	a-farm animals amples: Dogs, cats, birds, ho o es. Describe	orses		
■ N	-	ehold items you did not already list, including ar	ny health aids you did not list	
		your entries from Part 3, including any entries f		\$1,100.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

De	ebtor 1	Jon Thom	nas McBur	nie	Case number (if known)	
						claims or exemptions.
16.	□ No		·	our wallet, in your home,	in a safe deposit box, and on hand when you file your petition	
					Cash	\$20.00
17.					s; certificates of deposit; shares in credit unions, brokerage hou n the same institution, list each.	ses, and other similar
	_				Institution name:	
			17.1.	Checking Account	US Bank	Unknown
			17.2.	Checking	Wells Fargo-Not sure if there are funds in account	Unknown
18.	Examp			ely traded stocks ent accounts with brokera	age firms, money market accounts	
19.	Non-pu	ublicly traded	l stock and		ed and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No	enture Give specific		about themne of entity:	% of ownership:	
20.	Negoti Non-ne	iable instrume	ents include pruments are information a	personal checks, cashiers those you cannot transfe about them	le and non-negotiable instruments s' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
21.		ment or pensioles: Interests	ion account		o), thrift savings accounts, or other pension or profit-sharing pla	ns
	■ No □ Yes.	List each acco		ely. of account:	Institution name:	
22.	Your s		used deposit	s you have made so that	t you may continue service or use from a company ic utilities (electric, gas, water), telecommunications companies	s, or others
					Institution name or individual:	
23.	Annuiti	ies (A contrac	ct for a perio	dic payment of money to	you, either for life or for a number of years)	
	☐ Yes			e and description.		
24.			1), 529A(b),	and 529(b)(1).	ied ABLE program, or under a qualified state tuition progra	∄M.
	☐ Yes				eparately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	, equitable or	future inte	rests in property (other	than anything listed in line 1), and rights or powers exerci	sable for your benefit

D	ebtor 1	Jon Thomas McBurnie		C:	ase number (if known)	
	☐ Yes.	Give specific information about	them			
26	_Examp	s, copyrights, trademarks, trac les: Internet domain names, wel			S	
	■ No □ Yes.	Give specific information about	them			
27		es, franchises, and other gene les: Building permits, exclusive		on holdings, liquor license	es, professional licenses	
	☐ Yes.	Give specific information about	them			
M	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. <b>Tax ref</b> □ No	unds owed to you				
	_	Give specific information about t	hem, including whether you alre	eady filed the returns and	the tax years	
			Potential 2019 Income	Гах Refunds	State	Unknown
	■ No □ Yes. Interest Examp	dimounts someone owes you bles: Unpaid wages, disability instance benefits; unpaid loans you describe the specific information  Its in insurance policies bles: Health, disability, or life insurance tompany or Company	rance; health savings account each policy and list its value.		er's, or renter's insurance	tion, Social Security  Surrender or refund
		Company	name:	Beneficiary	:	value:
32	If you a someo	erest in property that is due youre the beneficiary of a living true ne has died.  Give specific information			urrently entitled to receive	e property because
33	Examp  ■ No	against third parties, whether les: Accidents, employment disponders beach claim			or payment	
34		ontingent and unliquidated cl	aims of every nature, includi	ng counterclaims of the	debtor and rights to se	et off claims
	■ No □ Yes.	Describe each claim				
35		ancial assets you did not alre	ady list			
	□ No ■ Yes.	Give specific information				

Debtor 1	Jon Thomas McBurnie		Case number (if known)	
	Wages owed by Employ	/er		Unknown
	d the dollar value of all of your entries from Part 4, including Part 4. Write that number here			\$20.00
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	te in Part 1.	
■ No.	u own or have any legal or equitable interest in any business-relate Go to Part 6. Go to line 38.	d property?		
	Describe Any Farm- and Commercial Fishing-Related Property You f you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>Do y</b>	ou own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	o. Go to Part 7.			
ΠY	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Exa ■ No	ou have other property of any kind you did not already list?  mples: Season tickets, country club membership  s. Give specific information	•		
54. <b>Ad</b>	d the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Pa</b> ı	t 1: Total real estate, line 2			\$0.00
56. <b>Pa</b> i	t 2: Total vehicles, line 5	\$25,000.00		
57. <b>Pa</b> i	t 3: Total personal and household items, line 15	\$1,100.00		
58. <b>Pa</b> i	t 4: Total financial assets, line 36	\$20.00		
59. <b>Pa</b> ı	t 5: Total business-related property, line 45	\$0.00		
60. <b>Pa</b> i	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b> ı	t 7: Total other property not listed, line 54 +	\$0.00		
62. <b>Tot</b>	al personal property. Add lines 56 through 61	\$26,120.00	Copy personal property t	total <b>\$26,120.00</b>
63. <b>Tot</b>	al of all property on Schedule A/B. Add line 55 + line 62			\$26,120.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Jon Thomas McE	Burnie		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON		
Case number _				Check if this is an
				amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	2012 Dodge Ram Line from Schedule A/B: 3.1	\$25,000.00		\$0.00	11 U.S.C. § 522(d)(2)		
	Line Ironi Schedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit			
	Cell Phone, TV Line from Schedule A/B: 7.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)		
	Ellie Holli Genedale A.B. TTI			100% of fair market value, up to any applicable statutory limit			
	Clothes Line from Schedule A/B: 11.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)		
	Line nom <i>Schedule A/D</i> . 11.1			100% of fair market value, up to any applicable statutory limit			
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)		
	Ellie Holli Genedale A.B. 1911			100% of fair market value, up to any applicable statutory limit			
	Checking Account: US Bank Line from Schedule A/B: 17.1	Unknown		100%	11 U.S.C. § 522(d)(5)		
	Line from Goriedate AVD. 1111			100% of fair market value, up to any applicable statutory limit			

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

De	btor 1	or 1 Jon Thomas McBurnie			Case number (if known)			
		lescription of the property and line on ulule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
		king: Wells Fargo-Not sure if	Unknown		100%	11 U.S.C. § 522(d)(5)		
		rom Schedule A/B: <b>17.2</b>			100% of fair market value, up to any applicable statutory limit			
	State	: Potential 2019 Income Tax	Unknown		100%	11 U.S.C. § 522(d)(5)		
		rom Schedule A/B: <b>28.1</b>			100% of fair market value, up to any applicable statutory limit			
	Wages owed by Employer Line from Schedule A/B: 35.1		Unknown		100%	11 U.S.C. § 522(d)(5)		
	Lille II	om scriedule AVB. 33.1			100% of fair market value, up to any applicable statutory limit			
<ul> <li>3. Are you claiming a homestead exemption of more than \$170,350?         (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)     </li> <li>No</li> </ul>								
		es. Did you acquire the property cove	red by the exemption wi	thin 1	215 days before you filed this case	?		
		☐ No						
	L	Yes						

Fill in this informa	tion to identify you	ır case:				
Debtor 1	Jon Thomas Mo					
Dalatana	First Name	Middle Name L	ast Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name L	ast Name			
United States Bank	ruptcy Court for the	DISTRICT OF OREGON				
Case number (if known)					_	if this is an
Official Form	106D					
Schedule D	: Creditors	Who Have Claims Se	ecure	d by Propert	У	12/15
		If two married people are filing together, out, number the entries, and attach it to t				
1. Do any creditors ha	ave claims secured by	y your property?				
☐ No. Check th	nis box and submit t	his form to the court with your other scl	hedules. Y	ou have nothing else t	o report on this form.	
Yes Fill in a	Il of the information	helow		-	·	
	Secured Claims	zolow.				
·		more than one secured claim, list the credite	r congratoly	, Column A	Column B	Column C
for each claim. If more	e than one creditor has	more than one secured claim, list the creditos a a particular claim, list the other creditors in cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
	cceptance Co	Describe the property that secures the	claim:	\$30,153.00	\$25,000.00	\$5,153.00
Attn: Bankr 1424 E Firet Greenville,	tower Rd	As of the date you file, the claim is: Che apply.  Contingent	eck all that			
Number, Street, Ci	ity, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mor car loan)	tgage or se	cured		
Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
At least one of the Check if this clair community debt	n relates to a	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)				
Date debt was incurr	Opened 10/19 Last Active ed 12/27/19	Last 4 digits of account number	9401			
	ge of your form, add	olumn A on this page. Write that number the dollar value totals from all pages.	here:	\$30,15 \$30,15		

# Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill i	n this inforr	nation to identify your	case:					
Debt	tor 1	Jon Thomas McB	urnie					
		First Name	Middle Na	ne	Last Name			
Debt		First Name	Middle Na		Loot Name			
(Spou	se if, filing)	First Name	Middle Nai	ie	Last Name			
Unite	ed States Ba	nkruptcy Court for the:	DISTRICT O	OREGON				
Case	e number							
(if kno								Check if this is an
							a	mended filing
~ ···	–	4005/5						
		n 106E/F						4044
		/F: Creditors W						12/15 ms. List the other party to
Sched left. A	dule D: Credit ttach the Cor and case nur	tory Contracts and Unexp ors Who Have Claims Sec ttinuation Page to this pag nber (if known). Il of Your PRIORITY Un	ured by Property ge. If you have no	r. If more space information to	e is needed, copy the Par	t you need, fill it out,	number the en	tries in the boxes on the
		ors have priority unsecure						
_	No. Go to F		J	•				
_	□ Yes.	art Z.						
	<b>–</b> 165.							
Part	2: List A	II of Your NONPRIORIT	Y Unsecured	Claims				
3. [	Oo any credito	ors have nonpriority unsec	cured claims aga	inst you?				
[	☐ No. You ha	ve nothing to report in this p	art. Submit this fo	rm to the court	with your other schedules.			
ı	Yes.							
t!	ınsecured claii	r nonpriority unsecured cl m, list the creditor separately or holds a particular claim, I	y for each claim. I	or each claim I	listed, identify what type of o	claim it is. Do not list cla	aims already ind	cluded in Part 1. If more
								Total claim
4.1	Midlan	d Credit Managemer	nt I	ast 4 digits of	f account number			\$774.00
		y Creditor's Name		<b>A</b> // 4/				
		: 301030 geles, CA 90030-103		vnen was the	debt incurred?			-
		treet City State Zip Code		s of the date	you file, the claim is: Che	ck all that apply		
	Who incu	rred the debt? Check one.						
	Debtor	1 only		☐ Contingent				
	☐ Debtor	2 only		☐ Unliquidated	d			
	☐ Debtor	1 and Debtor 2 only		☐ Disputed				
	☐ At leas	st one of the debtors and and	other .	ype of NONPI	RIORITY unsecured claim	:		
	_	if this claim is for a comi		☐ Student loan	าร			
	debt				arising out of a separation a	agreement or divorce th	nat you did not	
	_	m subject to offset?		eport as priority	,			
	No			•	nsion or profit-sharing plans	, and other similar deb	ts	
	☐ Yes			Other, Speci	ify Collections			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

	or 1 Jon Thomas McBurnie		Case number (if known)	
4.2	Capital One	Last 4 digits of account number	4042	\$858.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/16 Last Active 3/12/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	d Claim:	
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Cash and Go	Last 4 digits of account number		\$361.00
	Nonpriority Creditor's Name	_		·
	PO Box 535	When was the debt incurred?		
	Dublin, OH 43017  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Loan		
4.4	Central Willamette Co	Last 4 digits of account number	0121	\$7,841.00
	Nonpriority Creditor's Name	_	On an all 44/40. I and Anthon	
	645 Waverly Dr Se Albany, OR 97321	When was the debt incurred?	Opened 11/16 Last Active 3/30/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Specify Card

Page 2 of 9

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

**Automobile Defeciency Loan and Credit** 

Jon Thomas McBurnie		Case number (if known)	
Central Willamette Co	Last 4 digits of account number	0141	\$420.0
Nonpriority Creditor's Name 645 Waverly Dr Se Albany, OR 97321	When was the debt incurred?	Opened 12/16 Last Active 3/18/19	
Number Street City State Zip Code Who incurred the debt? Check one	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and a	nother Type of NONPRIORITY unsecur	ed claim:	
☐ Check if this claim is for a condebt	munity	continuo assamant or divorce that you did not	
Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did not	
No	☐ Debts to pension or profit-shar		
Yes	Other. Specify Check Cre	edit Or Line Of Credit	
Century Link	Last 4 digits of account number		\$300.0
Nonpriority Creditor's Name PO Box 4300 Carol Stream, IL 60197-430	When was the debt incurred?		
Number Street City State Zip Code  Who incurred the debt? Check one	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and a	T ( NONDRIGHT)	ed claim:	
☐ Check if this claim is for a com	D 044		
debt Is the claim subject to offset?	<u> </u>	paration agreement or divorce that you did not	
No	☐ Debts to pension or profit-shar	ing plans, and other similar debts	
Yes	Other. Specify Phone		
Chase Bank	Last 4 digits of account number		\$800.0
Nonpriority Creditor's Name PO Box 94014	When was the debt incurred?		
Palatine, IL 60094-4014  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and a		ed claim:	
☐ Check if this claim is for a com			
debt		paration agreement or divorce that you did not	

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

Page 3 of 9

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debto	r 1 Jon Thomas McBurnie		Case number (if known)	
4.8	Comcast	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name PO Box 60533 City of Industry, CA 91716-0533	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.9	Contract Callers Inc.	Last 4 digits of account number		\$414.00
	Nonpriority Creditor's Name PO Box 2207	When was the debt incurred?		
	Augusta, GA 30903-2207  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collections	<u> </u>	
4.1	Credit Concept	Last 4 digits of account number	1048	\$8,841.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 220 W 7th Ave Eugene, OR 97401	When was the debt incurred?	Opened 11/19/18 Last Active 9/20/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Automobile	Defeciency Loan	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 9

1 Jon Thomas McBurnie		Case number (if known)	
Department of Education/Nelnet	Last 4 digits of account number	5679	\$9,632
Nonpriority Creditor's Name	_		
Attn: Claims		Opened 02/17 Last Active	
Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	12/31/19	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	<b>,</b>		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
<b>ப</b> 169	Educationa	al Loans	
	Euucationa	II LUAII3	
Gohealth Urgent Care	Last 4 digits of account number		\$46
Nonpriority Creditor's Name	_		
PO Box 2926	When was the debt incurred?		
Portland, OR 97208-2926	As of the data way file the plains	tra OL - L - Hall - A	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	S: Check all that apply	
_	_		
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Medical		
Hope Orthopedics	Last 4 digits of account number		\$786
Nonpriority Creditor's Name 1600 State St. Salem, OR 97301	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

1 Jon Thomas McBurnie	Case number (if known)	
Internal Revenue Service	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name PO Box 7346	When was the debt incurred?	
Philadelphia, PA 19101-7346  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Information Only	
Laboratory Corporation of America	Last 4 digits of account number	\$27.0
Nonpriority Creditor's Name		<u> </u>
PO Box 2240 Burlington, NC 27216-2240	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Collections	
Lamany Laboratory Compless		\$22.0
Legacy Laboratory Services  Nonpriority Creditor's Name	Last 4 digits of account number	<b>Φ</b> ΖΖ.(
PO Box 2829 Portland, OR 97208	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

Schedule E/F: Creditors Who Have Unsecured Claims

Midley d Frond		0000	A
Midland Fund Nonpriority Creditor's Name	Last 4 digits of account number	0290	\$774.0
Attn: Bankruptcy 350 Camino De La Reine Ste 100 San Diego, CA 92108	When was the debt incurred?	Opened 09/18	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Bank N.A.	Company Account Credit One	
Oregon Department of Revenue	Last 4 digits of account number		\$0.
Nonpriority Creditor's Name 955 Center St. NE #353	When was the debt incurred?		
Salem, OR 97301  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	7.6 6 4 7	or o	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Information	Only	
Progressive Leasing	Last 4 digits of account number		\$2,300
Nonpriority Creditor's Name 256 Data Dr. Draper, UT 84020	When was the debt incurred?		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
$\square$ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	■ Other. Specify Tires		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 9

-		
Salem Clinic	Last 4 digits of account number	\$8
Nonpriority Creditor's Name		
PO Box 8100 Salem, OR 97303-0900	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	. , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Salem Health	Last 4 digits of account number	\$36
Nonpriority Creditor's Name	Last 4 digits of account number	ΨΟ
PO Box 6003	When was the debt incurred?	
Portland, OR 97228-6990  Number Street City State Zip Code	As of the date you file the claim is Check all that each	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
_		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Salem Hospital	Lost 4 divite of account number	\$245
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ2-10
PO Box 6990	When was the debt incurred?	
Portland, OR 97228-6990	As of the date you file the claim in Observation that	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 1 only  Debtor 2 only		
_	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	

Schedule E/F: Creditors Who Have Unsecured Claims

4.2	
^	

<sup>2</sup> Zocaloans	Last 4 digits of account number	\$500.00
Nonpriority Creditor's Name 9620 Las Vegas Blvd. S. #593	When was the debt incurred?	
Las Vegas, NV 89123  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Loan	

## Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Tatal	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 9,632.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	60	\$ 0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 
				\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 25,353.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 34,985.00

Fill in this infor	mation to identify your	case:			
Debtor 1	Jon Thomas McB	urnie			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON			
Case number					
(if known)					Check if this is an amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have the r, Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Fill in this	information to identify your	case:			
Debtor 1	Jon Thomas McE	Burnie			
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF OREGO	N		
Case numl (if known)	ber			☐ Check if this is an amended filing	
	l Form 106H Iule H: Your Cod	ebtors		12/1	5
fill it out, a your name		boxes on the left. Attack . Answer every question	n the Additional Page to	ion. If more space is needed, copy the Additional Pa o this page. On the top of any Additional Pages, writ as a codebtor.	
■ No	<b>;</b>				
Arizon  No.	hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Washi	y? (Community property states and territories include ington, and Wisconsin.)	
in line Form	2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the person sho sure you have listed the creditor on Schedule D (Off 16G). Use Schedule D, Schedule E/F, or Schedule G t	icial
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	ebt
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	

E:11	in this information to	:-14:6									
	in this information to btor 1	Jon Thomas									
	btor 2 buse, if filing)										
Uni	ited States Bankruptc	y Court for the	: DISTRICT OF OREG	ON							
	se number nown)			-			☐ An ☐ A s		nt showing	g postpetition llowing date:	
0	fficial Form 1	<u> 1061</u>					MN	// / DD/ YY	/YY		
S	chedule I: Y	our Inco	ome								12/15
spo atta	use. If you are separ ch a separate sheet rt 1: Describe	rated and you to this form. ( Employment	are married and not filir r spouse is not filing wi On the top of any additi	ith you, do not incl	ude infor	mati	on about y I case nur	your spounder (if k	use. If mo nown). Ar	re space is	needed,
	information.	an ana iah		■ Employed				☐ Employ		ing spouse	
	If you have more the attach a separate prinformation about a	age with	Employment status	■ Employed  ■ Not employed				☐ Not em			
	employers.		Occupation	Tree Trimmer							
	Include part-time, so self-employed work		Employer's name	Asplundh							
	Occupation may incor homemaker, if it		Employer's address	10985 SW Clut Sherwood, OR							
			How long employed t	here? 2 year	s						
Par	rt 2: Give Deta	ils About Mon	thly Income								
	imate monthly incomuse unless you are se		ate you file this form. If	you have nothing to	report for	any	line, write S	\$0 in the s	space. Incl	lude your noi	n-filing
	ou or your non-filing sp e space, attach a sep		ore than one employer, co	ombine the informati	on for all	emple	oyers for th	nat persor	on the lin	nes below. If	you need
							For Debt	or 1	For Deb	otor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	4,3	328.00	\$	N/A	
3.	Estimate and list n	monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross In	come. Add lir	ne 2 + line 3.		4.	\$	4,328	8.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

				F	or Debtor 1			Debtor 2 or filing spous	e
	Сору	/ line 4 here	4.	\$	4,328	.00	\$	N/	<b>'</b> A
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,136	.00	\$	N/	<b>'</b> A
	5b.	Mandatory contributions for retirement plans	5b.	\$		.00	\$	N/	<u>'A</u>
	5c.	Voluntary contributions for retirement plans	5c.	\$	0	.00	\$	N/	<u>'Α</u>
	5d.	Required repayments of retirement fund loans	5d.	\$	0	.00	\$	N/	Ά
	5e.	Insurance	5e.	\$	0	.00	\$	N/	<u>Ά</u>
	5f.	Domestic support obligations	5f.	\$	0	.00	\$	N/	Ά
	5g.	Union dues	5g.	\$	40	.00	\$	N/	<u>'Α</u>
	5h.	Other deductions. Specify:	5h	+ \$	0	.00	+ \$	N/	'A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,176	.00	\$	N/	<u>'A</u>
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,152	.00	\$	N/	<u>'A</u>
8.	List a 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0	.00	\$	N	<b>'</b> A
	8b.	Interest and dividends	8b.	\$	0	.00	\$	N/	'A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce					_		
		settlement, and property settlement.	8c.	\$		.00	\$		<u>'A</u>
	8d.	Unemployment compensation	8d.	\$		.00	\$		<u>'A</u>
	8e.	Social Security	8e.	\$	0	.00	\$	N/	<u>'A</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	o	.00	\$	N/	<b>′</b> A
	8g.	Pension or retirement income	8g.	\$		.00	\$		<u>'A</u>
	8h.	Other monthly income. Specify:	8h	+ \$	0	.00	+ \$	N/	<u>'A</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0	.00	\$	N	I/A
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,152.00	+ \$_		<b>N/A</b> = \$	3,152.00
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not ify:	deper		-			chedule J.	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines						12. \$	3,152.00
13.	Do y	ou expect an increase or decrease within the year after you file this form	?						bined thly income
		No.							
		Yes. Explain:							

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify ye	our case:						
Deb	tor 1	Jon Thomas	McBurn	ie			Che	ck if this is:	
D-1-	tor 2							An amended filing	of a managed and the contract
	ouse, if filing)							13 expenses as of	wing postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: DISTRI	CT OF OREGON				MM / DD / YYYY	
1	e number								
(If ki	nown)								
Of	fficial Fo	rm 106J							
So	chedule	J: Your	Exper	ises					12/15
Be	as complete a	and accurate as	s possible. eded, atta	If two married peo					or supplying correct your name and case
Par		ibe Your House	ehold						
1.	Is this a joir No. Go to								
			in a separ	ate household?					
	□N	0							
	□ Y	es. Debtor 2 mu	st file Offici	al Form 106J-2, <i>Exp</i>	oenses fo	r Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	☐ No						
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information each dependent		Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state					_			□ No
	dependents	names.			-	Son		2 Months	■ Yes □ No
									☐ Yes
					-				□ No
								_	☐ Yes
									□ No
3.	Do your eyr	enses include	_		-				☐ Yes
O.	expenses of	f people other t d your depende	han 🗖	No Yes					
		ate Your Ongoi							
exp									apter 13 case to report of the form and fill in the
	•	•		government assista	•				
	value of such ficial Form 10		d have inc	luded it on <i>Schedu</i>	ule I: You	ır Income		Your exp	enses
4.		or home owners and any rent for th		ses for your reside r lot.	ence. Incl	ude first mortgag	e 4. :	\$	1,050.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes					4a.	\$	0.00
	•	rty, homeowner'					4b.	·	0.00
				ipkeep expenses			4c.		0.00
F		owner's associa			00 ho	oquity loops	4d.	·	0.00
5.	Additional f	nortgage paym	ents for yo	our residence, such	i as nome	equity loans	5.	Φ	0.00

Jon Tho	mas McBurnie	Case	num	ber (if known)	
ities:					
Electricity,	heat, natural gas		6a.	\$	60.00
Water, sev	ver, garbage collection		6b.	\$	0.00
Telephone	e, cell phone, Internet, satellite, and cable services		6c.	\$	360.00
Other. Spe	ecify:		6d.	\$	0.00
d and house	ekeeping supplies		7.	\$	300.00
Idcare and c	hildren's education costs		8.	\$	0.00
thing, laund	ry, and dry cleaning		9.	\$	50.00
			10.	\$	25.00
•				·	50.00
	•			·	
•	5 , ,		12.	\$	300.00
		books	13.	\$	75.00
aritable cont	ributions and religious donations		14.	\$	0.00
urance.	_				
not include in	surance deducted from your pay or included in line	s 4 or 20.			
. Life insura	nce	1	5a.	\$	120.00
. Health ins	urance	1	5b.	\$	0.00
. Vehicle ins	surance	1	5c.	\$	310.00
. Other insu	rance. Specify:	1	5d.	\$	0.00
es. Do not in	clude taxes deducted from your pay or included in I	ines 4 or 20.			
ecify:			16.	\$	0.00
				· · ·	646.00
				\$	0.00
				\$	0.00
•	· · · · · · · · · · · · · · · · · · ·		7d.	\$	0.00
			40	<b>c</b>	0.00
		.o.a ooo.,.	18.		
	s you make to support others who do not live wi	•		<b>&gt;</b>	0.00
			-		
					0.00
	• • •			·	0.00
					0.00
				·	0.00
				·	0.00
				·	0.00
er: Specify:	Storage Unit		21.	+\$	100.00
culate vour i	nonthly expenses				
				\$	3,446.00
	S	cial Form 106J-2			<u> </u>
		Mai 1 01111 1000 E		·	3,446.00
. Add lifte 22a	a and 22b. The result is your monthly expenses.			Φ	3,446.00
culate your i	nonthly net income.				
. Copy line	12 (your combined monthly income) from Schedule	I. 2	За.	\$	3,152.00
. Copy your	monthly expenses from line 22c above.	2	3b.	-\$	3,446.00
					·
		_		œ.	204.00
The result	is your monthly net income.	2	ЗC.	Ф	-294.00
example, do yo lification to the	u expect to finish paying for your car loan within the year of				e or decrease because of a
No.					
Yes.	Explain here:				
	ities: Electricity, Water, sev Telephone Other. Spe od and house Idcare and c Ithing, laundi Isonal care p Idical and der Insportation. Inot include ca Inot include in Life insura Health insi Vehicle insi Other insu Ites. Other insu Ites. Other insu Ites. Other Spe Ites allment or Ite Ites allment or Ites Ites all all all all all Ites all all all all Ites all all all all Ites all all Ites all all all Ites al	ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Id and housekeeping supplies Idcare and children's education costs thing, laundry, and dry cleaning sonal care products and services Idical and dental expenses Insportation. Include gas, maintenance, bus or train fare. Inot include car payments. Increase and children's education, newspapers, magazines, and Intriable contributions and religious donations Irrance. Inot include insurance deducted from your pay or included in line Life insurance Intellite insurance Other insurance. Specify: In payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: In payments of alimony, maintenance, and support that you fucted from your pay on line 5, Schedule I, Your Income (Offer payments you make to support others who do not live with incity: In payments of alimony, maintenance, and support that you fucted from your pay on line 5, Schedule I, Your Income (Offer payments you make to support others who do not live with incity: In payments of alimony, maintenance, and support that you fucted from your pay on line 5, Schedule I, Your Income (Offer payments you make to support others who do not live with incity: In payments of alimony, maintenance, and support that you fucted from your pay on line 5, Schedule I, Your Income (Offer payments you make to support others who do not live with incity: In payments of alimony, maintenance, and support that you fucted from your pay on line 5, Schedule I, Your Income (Offer payments you make to support others who do not live with incity: In payments of alimony, maintenance, and support that you fucted from your pay on line 5, Schedule I, Your Income (Offer payments you make to support others who do not live with incity: In payments of alimony, maintenance, and support that you fucted from your monthly expenses for Debtor 2), if any, from Offic your monthly expenses from line 22c above.  Subtract your monthly	ities:  Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: dd and housekeeping supplies Idcare and children's education costs thing, laundry, and dry cleaning sonal care products and services Idical and dental expenses Insportation. Include gas, maintenance, bus or train fare. Incit include car payments. ertainment, clubs, recreation, newspapers, magazines, and books uritable contributions and religious donations urance. I Health insurance I Car payments for Vehicle 1 I Car payments for Vehicle 1 I Car payments for Vehicle 2 I Cher. Specify: I Capayments for Vehicle 2 I Other. Specify: I Desperity: I Desperity	ities:  Electricity, heat, natural gas  Electricity, heat, natural gas  Water, sewer, garbage collection  Telephone, cell phone, Internet, satellite, and cable services  Cother. Specify:  6d.  dand housekeeping supplies  7.  Idicare and children's education costs  thing, laundry, and dry cleaning  9.  sonal care products and services  10.  Idical and dental expenses  10.  Idical and dental expenses  11.  Insportation. Include gas, maintenance, bus or train fare.  not include car payments.  retrainment, Clubs, recreation, newspapers, magazines, and books  13.  ritiable contributions and religious donations  14.  urance.  not include insurance deducted from your pay or included in lines 4 or 20.  Life insurance  15a.  Health insurance  15b.  Vehicle insurance specify:  8c. Do not include taxes deducted from your pay or included in lines 4 or 20.  cify:  16.  17a.  Car payments for Vehicle 1  17a.  Car payments for Vehicle 1  17a.  Car payments for Vehicle 2  17b.  Other. Specify:  17c.  Other. Specify:  18er payments you make to support others who do not live with you.  cify:  19er real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106i).  18er payments you make to support others who do not live with you.  cify:  19er real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Mortagages on other property  20a.  Property, homeowner's, or renter's insurance  20b.  Property, homeowner's, or renter's insurance  20c.  Maintenance, repair, and upkeep expenses  20d.  Homeowner's association or condominium dues  21.  Copy line 22 (monthly expenses fron Debtor 2), if any, from Official Form 106J-2  Add line 22a and 22b. The result is your monthly expenses.  culate your monthly net income.  Copy line 12 (your combined monthly income) from Schedule I.  23a.  Subtract your monthly expenses from line 22c above.  23b.  Subtract	Itilises: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cother. Specify: dand housekeeping supplies Id and A products and services Id a product and services Id a product and services Id a services Id a services Id a services Id a services In a services I

Fill in this infor	rmation to identify your	case:			
Debtor 1	Jon Thomas McB	urnie			
	First Name	Middle Name	Last Name		
Debtor 2	E: AN	ACT III AT			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF OREGON			
Case number					
(if known)					Check if this is an
					amended filing
			Debtor's Sche		12/15
if two married p	eople are filling togethe	, both are equally respons	sible for supplying correct i	ntormation.	
obtaining mone years, or both.		n connection with a bankr	or amended schedules. Mak uptcy case can result in find		
	ay or agree to pay some	one who is NOT an attorn	ey to help you fill out bankr	uptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Peta Declaration, and Signa	tition Preparer's Notice, ature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summ	ary and schedules filed wit	h this declaration and	
X /s/ Joi	n Thomas McBurnie		X		
	homas McBurnie ure of Debtor 1		Signature of Debt	or 2	
Date	February 5, 2020		Date		

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Fil	ll in this inform	ation to identify you	r case:			
De	ebtor 1	Jon Thomas Mc				
Do	htor 2	First Name	Middle Name	Last Name		
1	ebtor 2 pouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Ban	kruptcy Court for the:	DISTRICT OF OREGON	I		
Ca	ase number					
(if k	known)		_			Check if this is an amended filing
0	fficial For	m 107				
St	atement	of Financial	Affairs for Indivi	duals Filing for E	Bankruptcy	4/19
info	ormation. If mo		attach a separate sheet to	are filing together, both are this form. On the top of ar		
		,	arital Status and Where Yo	u Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married					
	■ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
		all of the places you l	ived in the last 3 years. Do r	not include where you live no	W.	
	Debtor 1 Pri	. ,	Dates Debtor 1	,		Dates Debtor 2
	Debioi I I II	or Address.	lived there	Debtor 2 i nor A	uui ess.	lived there
	350 Thirtee Salem, OR	enth St. #212 97301	From-To: <b>July, 2019</b>	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	3185 Link ( Salem, OR		From-To: <b>2016-July, 2</b> 0	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
<b>3.</b> sta	tes and territorie			gal equivalent in a commu evada, New Mexico, Puerto F		
	■ No	co curo vou fill out Co	hedule H: Your Codebtors (C	Official Form 106H)		
	Tes. Mar	te sure you fill out 3 <i>cl</i>	riedule H. Your Codebiors (C	miciai Foitii 100H).		
Pa	ert 2 Explain	the Sources of You	r Income			
4.	Fill in the total	amount of income yo	u received from all jobs and	ng a business during this y all businesses, including par we together, list it only once u	t-time activities.	lendar years?
	□ No					
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

□ No.

Yes

Go to line 7.

attorney for this bankruptcy case.

Case number (if known)

Official Form 107

Debtor 1

Jon Thomas McBurnie

Statement of Financial Affairs for Individuals Filing for Bankruptcy

11.	Within 90 days before you filed for bank accounts or refuse to make a payment I  No  Yes. Fill in the details.		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any a	mounts from your	
		Da	scribe the action the creditor took	Data action was	A marint	
	Creditor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount	
2.	Within 1 year before you filed for bankri court-appointed receiver, a custodian, o  ■ No □ Yes		ras any of your property in the possession of an a er official?	assignee for the bene	fit of creditors, a	
Par	t 5: List Certain Gifts and Contribution	าร				
3.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift.	ruptcy, (	did you give any gifts with a total value of more tl	nan \$600 per person?		
	Gifts with a total value of more than \$6 per person  Person to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value	
	Address:					
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No Yes. Fill in the details for each gift or contribution.					
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed	Dates you contributed	Value	
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?					
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred  Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.			Date of your loss	Value of property lost	
Par	t 7: List Certain Payments or Transfer	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No Yes. Fill in the details.	, , , ,	ty to anyone you			
			Description and value of any property	Data navment	Amount of	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment	
	Upright Law, LLC 79 W. Monroe St. 5th Floor Chicago, IL 60603 smattorney@hotmail.com		Attorney Fees - \$1500.00 Filing Fee - \$335.00	payments were made in installments between 11/01/2019 and 01/20/2020	\$1,835.00	

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Debtor 1 Jon Thomas McBurnie

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	value of any prop	perty	Date payment or transfer was made	Amount of payment	
	Money Sharp 1916 N. Fairfield Ave. Suite 200 Chicago, IL 60647 www.moneysharp.org	Credit Counsel	ing Class		January, 2020	\$10.00	
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you	s or to make payment			or transfer any prope	rty to anyone who	
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and transferred	value of any prop	perty	Date payment or transfer was made	Amount of payment	
40	Militia O						
	Within 2 years before you filed for bankruptc transferred in the ordinary course of your but			ister any prop	perty to anyone, othe	r than property	
	Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.						
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and property transfer			any property or s received or debts schange	Date transfer was made	
	Person's relationship to you						
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein No.		ny property to a s	self-settled tr	ust or similar device	of which you are a	
	Yes. Fill in the details.						
	Name of trust	Description and	Description and value of the property transferred		red	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposi	t Boxes, and Sto	rage Units			
20.	Within 1 year before you filed for bankruptcy	, were any financial ac	counts or instru	ıments held iı	n your name, or for yo	our benefit, closed,	
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No						
	■ No □ Yes. Fill in the details.						
		Last 4 digits of	Type of accoun	nt or Do	oto populint was	Loct balance	
		Last 4 digits of account number	Type of accourant instrument	clo me	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 yeash, or other valuables?	ear before you filed fo	r bankruptcy, an	y safe deposi	t box or other depos	itory for securities,	
	■ No						
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

22.	Have you stored property in a storage unit or	place other than your home within	1 year before you filed for bankruptcy	?			
	□ No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
	Public Storage 280 Lancaster Dr. NE Salem, OR 97301	Debtor	Clothes, Furnishings	□ No ■ Yes			
Pai	rt 9: Identify Property You Hold or Control fo	r Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Include any prope	erty you borrowed from, are storing fo	r, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Pai	rt 10: Give Details About Environmental Inform	mation					
For	the purpose of Part 10, the following definition	s apply:					
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface water, groun	- ·				
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	•	l law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,			
Rep	port all notices, releases, and proceedings that	you know about, regardless of whe	en they occurred.				
24.	Has any governmental unit notified you that you	ou may be liable or potentially liabl	e under or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admir	nistrative proceeding under any env	vironmental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
		•					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1	Jon Thomas McBurnie	Ca	ase number (if known)				
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business					
27.	With	n 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
		☐ A partner in a partnership						
		☐ An officer, director, or managing executive of a corporation						
		☐ An owner of at least 5% of the voting or equity securities of a corporation						
		No. None of the above applies. Go to I	Part 12.					
	_		I in the details below for each business.					
	Add	iness Name ress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.				
	(Num	ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed				
	instit	nt 2 years belone year filed for barriage, tutions, creditors, or other parties.  No Yes. Fill in the details below.	ioy, ala you give a illianolal statement to c	anyone about your business? Include all financial				
		Tess ber, Street, City, State and ZIP Code)	Date Issued					
Pai	rt 12:	Sign Below						
are with 18 U /s/ Jo	true and a bai J.S.C. Jon Tho	nd correct. I understand that making a nkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571. Thomas McBurnie omas McBurnie		declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.				
Sig	gnatur	e of Debtor 1						
Da	te F	ebruary 5, 2020	Date					
Did ■ N	No	ttach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filii	ng for Bankruptcy (Official Form 107)?				
Did ■ N		ay or agree to pay someone who is no	t an attorney to help you fill out bankrupto	cy forms?				
		ame of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### United States Bankruptcy Court District of Oregon

In re	Jon Thomas McBurnie		Case No.	
		Debtor(s)	Chapter <b>7</b>	
	VER	IFICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and c	correct to the best of his/her knowledge.	
Date:	February 5, 2020	/s/ Jon Thomas McBurnie		
		Signature of Debtor		